

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NV2981AGC</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/30/2010</b>
NAME OF PROVIDER OR SUPPLIER  <b>HOME AWAY FROM HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1235 GLENDA WAY RENO, NV 89509</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments  The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.  This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 6/30/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.  The facility is licensed for 20 Residential Facility for Group beds for elderly and disabled persons, 12 Category I residents and 8 Category II residents. The census at the time of the survey was five. Five resident files were reviewed and seven employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of C.  The following deficiencies were identified:	Y 000		
Y 103 SS=D	449.200(1)(d) Personnel File - NAC 441A / Tuberculosis  NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.  This Regulation is not met as evidenced by:	Y 103		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 1  Based on record review on 6/30/10, the facility failed to ensure that 1 of 7 caregivers complied with NAC 441A.375 regarding a pre-employment physical (Employee #2).  Severity: 2 Scope: 1	Y 103			
Y 105 SS=D	449.200(1)(f) Personnel File - Background Check  NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.  This Regulation is not met as evidenced by: Based on record review on 6/30/10, the facility failed to ensure 1 of 7 caregivers met background check requirements (Employee #2 - no FBI clearance).  Severity: 2 Scope: 1	Y 105			
Y 255 SS=F	449.217(6)(a)(b) Permits - Comply with NAC 446 on Food Service  NAC 449.217 6. A residential facility with more than 10 residents must: (a) Comply with the standards prescribed in chapter 446 of NAC. (b) Obtain the necessary permits from the Bureau of Health Protection Services of the Division.	Y 255			

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Y 255	<p>Continued From page 2</p> <p>This Regulation is not met as evidenced by: Based on observation, interview, and record review on 6/30/10, the facility failed to ensure the kitchen complied with the standards of NAC 446.</p> <p>Findings Include:</p> <p>1. Critical Violations:</p> <p>a. Observed raw bacon (bagged) stored with ready to eat foods such as deli meats, cooked meatloaf, and pre-cooked hot dogs within the reach-in refrigerator. Raw pork and eggs were also stored on the same shelf as ready to eat foods such as vegetables, milk, and juice within the reach-in refrigerator.</p> <p>2. Cleaning and Sanitation Issues:</p> <p>a. There was an unlabeled container of meat on the right side, second shelf of the reach-in refrigerator.</p> <p>b. A scoop was found improperly stored inside of a coffee container.</p> <p>c. The floors were found soiled with dust, food, and kitchen debris under the following equipment: dishwasher (behind), stove, refrigerator, and freezer.</p>	Y 255			

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Y 255	Continued From page 3  Severity: 2    Scope: 3	Y 255			
Y 276 SS=E	449.2175(7) Nutrition and Service of Food  NAC 449.2175 7. Meals must be nutritious, served in an appropriate manner, suitable for the residents and prepared with regard for individual preferences and religious requirements. At least three meals a day must be served at regular intervals. The times at which meals will be served must be posted. Not more than 14 hours may elapse between the meal in the evening and breakfast the next day. Snacks must be made available between meals for the residents who are not prohibited by their physicians from eating between meals.  This Regulation is not met as evidenced by: Based on interview and observation on 6/30/10, the facility did not serve meals and/or snacks that met individual preferences of residents.  Severity: 2    Scope: 2  This was a repeat deficiency from the 6/05/09 State Licensure survey.	Y 276			
Y 430 SS=E	449.229(1) Protection from Fire  NAC 449.229 1. The administrator of a residential facility shall ensure that the facility complies with the regulations adopted by the State Fire Marshal pursuant to chapter 477 of NRS and all local	Y 430			

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Y 430	Continued From page 4  ordinances relating to safety from fire. The facility must be approved for residency by the State Fire Marshal.  This Regulation is not met as evidenced by: Based on observation and testing on 6/30/10, the facility failed to maintain battery operated emergency lights for 2 of 6 emergency lights in the facility (top of the back stairs above book shelves, between laundry room and room #14).  Severity: 2 Scope: 2  This was a repeat deficiency from the 6/05/09 State Licensure survey.	Y 430			
Y 877 SS=D	449.2742(5) OTC medications & Dietary Supplements  NAC 449.2742 5. An over-the-counter medication or a dietary supplement may be given to a resident only if the resident's physician has approved the administration of the medication or supplement in writing or the facility is ordered to do so by another physician. The over-the-counter medication or dietary supplement must be administered in accordance with the written instructions of the physician. The administration of over-the-counter medication and dietary supplements must be included in the record required pursuant to paragraph (b) of subsection 1 of NAC 449.2744.	Y 877			

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Y 877	Continued From page 5  This Regulation is not met as evidenced by: Based on record review and interview on 6/30/10, the facility did not obtain physician orders to administer over-the-counter (OTC) medications to 1 of 5 residents (Resident #2 - Melatonin, stool softener and laxative).  Severity: 2      Scope: 1  This was a repeat deficiency from the 6/05/09 State Licensure survey.	Y 877			
Y 920 SS=D	449.2748(1) Medication Storage  NAC 449.2748 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key.	Y 920			

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